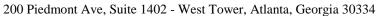
Form LOB Rev 12/2007

Lobbyist Registration Application

State Ethics Commission



(** All Fields must be completed and legible in order to process registration **)



	Lobbyist Identif			
Name (Last)	(First)		(Middle)	
First name for badge:	Email Address (Optional):			
Mailing Address (Street)			(Suite)	
City	State	Zi	p	
Contact Phone	Are you an employ	vee of a City or County:	Yes No	
	Lobbying on Be	half Of		
Type of Lobbying (Check all that ap State Local (City/C Name		ORIGINAL State Agency	AMENDMENT	
Mailing Address (Street)			(Suite)	
City	State	Zi	Zip	
Phone				
Has the above individual or entity a \$10,000.00 in a calendar year for lo		ount exceeding Yes	No	
General Business or Purpose of Par	ty Lobbied For:			
Name of state agency or agencies w If applicant represents a membersh corporation state the approximate n	ip group other than an agency or umber of members:		No	
Do You Serve As A Lobbyist For M	Verification by Oath o	Yes Yes	No	
State of	County of	AIIII III auoii		
LOBBYIST: I, the undersigned lobbyis		 .		
true, and correct to the best of my know any lobbyist report I submit electronical SIGNATURE OF LOBBYIST	eledge and belief, and that I am in ful lly in the future shall be complete, tr	ll compliance with the Ethics in ue, and correct to the best of m	Government Act*. I affirm that	
any lobbyist report I submit electronical SIGNATURE OF LOBBYIST	ledge and belief, and that I am in ful	ll compliance with the Ethics in ue, and correct to the best of m	Government Act*. I affirm that	
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* O.C.G.A. § 21-5-75 (a) Every constitutional officer; every elected state official; the executive head of every state department or agency, whether elected or appointed; each member of the General Assembly; and the executive director of each state board, commission, or authority shall be prohibited from registering as a lobbyist or engaging in lobbying under this article for a period of one year after terminating such employment or leaving such office.